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NEW MEXICO OIL CONSERVATION COMMISSION (Form C-104)
 Santa Fe, New Mexico
 Revised 7/1/57
REQUEST FOR (OIL) - (GAS) ALLOWABLE

New Well
Recompletion

This form shall be submitted by the operator before an initial allowable will be assigned to any completed Oil or Gas well. Form C-104 is to be submitted in QUADRUPLICATE to the same District Office to which Form C-101 was sent. The allowable will be assigned effective 7:00 A.M. on date of completion or recompletion, provided this form is filed during calendar month of completion or recompletion. The completion date shall be that date in the case of an oil well when new oil is delivered into the stock tanks. Gas must be reported on 15.025 psia at 60° Fahrenheit.

Farmington, New Mexico November 29, 1960
 (Place) (Date)

WE ARE HEREBY REQUESTING AN ALLOWABLE FOR A WELL KNOWN AS:

El Paso Natural Gas Company San Juan 29-6 Unit, Well No. 35 (ND), in SW $\frac{1}{4}$ SW $\frac{1}{4}$,
 (Company or Operator) (Lease)
M 15 29-N 6-W Blanco Mesa Verde Pool
 Unit Letter

Rio Arriba

Please indicate location:

D	C	B	A
E	F	G	H
L	K	J	I
M	N	O	P
X			

890 S, 1090 W

(FOOTAGE)

Tubing, Casing and Cementing Record

Size Feet Sax

13 3/8"	291	370
9 5/8"	3567	190
7"	7510	1015
5"	397	110
2"	7773	
2"	5605	

County. 8-20-60 Date Spudded 8-20-60 Date Drilling Completed 9-19-60
 Elevation 6440 Total Depth 7862 C.O. 7815

Top Oil/Gas Pay 5180' (Perf) Name of Prod. Form. Mesa Verde

PRODUCING INTERVAL - 5180-5192; 5208-5218; 5564-5570; 5582-5590;

Perforations 5594-5604; 5622-5630; 5656-5662

Open Hole None Depth 7521' Depth 5605
 Casing Shoe Tubing

OIL WELL TEST -

Natural Prod. Test: _____ bbls. oil, _____ bbls water in _____ hrs, _____ min. Choke Size _____

Test After Acid or Fracture Treatment (after recovery of volume of oil equal to volume of load oil used): _____ bbls. oil, _____ bbls water in _____ hrs, _____ min. Choke Size _____

GAS WELL TEST -

Natural Prod. Test: _____ MCF/Day; Hours flowed _____ Choke Size _____

Method of Testing (pitot, back pressure, etc.): _____

Test After Acid or Fracture Treatment: 10,009 MCF/Day; Hours flowed 3

Choke Size 3/4" Method of Testing: Calculated A.O.F.

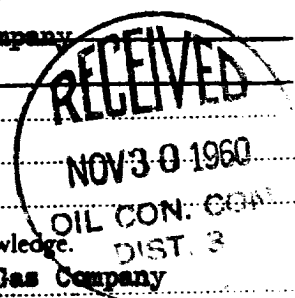
Acid or Fracture Treatment (Give amounts of materials used, such as acid, water, oil, and sand): 52,390 gal water & 60,000# sd.; 38,000 gal water & 40,000# sand

Casing 1088 Tubing 1091 Date first new oil run to tanks _____
 Press. Press.

Oil Transporter El Paso Natural Gas Products Company

Gas Transporter El Paso Natural Gas Company

Remarks: Baker Model "D" prod packer set at 7150'



I hereby certify that the information given above is true and complete to the best of my knowledge.
 Approved NOV 30 1960, 19____

El Paso Natural Gas Company
 (Company or Operator)

By: Original Signed By: D.H. Oheim
 (Signature)

OIL CONSERVATION COMMISSION
 Original Signed By: A. R. KENDRICK
 By: _____

Title Petroleum Engineer
 Send Communications regarding well to:
 Name E. S. Oberly

Title PETROLEUM ENGINEER DIST. NO. 3

Box 990, Farmington, New Mexico

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